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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To: Department of Alcoholic Beverage Control
1901 Broadway
Sacramento, Calif. 95818 Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S): OFF SALE GENERAL

Applied under Sec. 24044 ☐
Effective Date: When Trfd

FILE NO.
RECEIPT NO. 393766
GEOGRAPHICAL CODE 3902
Date Issued
Temp. Permit
Effective Date:

2. NAME(S) OF APPLICANT(S)

GRAVES, Hiram T./Ronda L.
WOOD, Jack/Diane

3. TYPE(S) OF TRANSACTION(S)

	FEE	LIC. TYPE
Per to Per	$ 1274.00	21
TOTAL	$ 1274.00	

4. Name of Business
Plaza Liquor #2

5. Location of Business—Number and Street
2400 West Turner Rd.

City and Zip Code: Lodi, Ca. 95240
County: San Joaquin

6. If Premises Licensed, Show Type of License: 21

7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street
Same

(Temp) (Perm)
Perm

9. Have you ever been convicted of a felony? No

10. Have you ever violated any of the provisions of the Alcoholic Beverage Control Act or regulations of the Department pertaining to the Act? No

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.

12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

13. STATE OF CALIFORNIA County of San Joaquin Date 1-28-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

14. APPLICANT SIGN HERE Ronda L. Graves, Diane Wood, Hiram T. Graves, Jack Wood

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of San Joaquin Date 1-28-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; (3) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

16. Name(s) of Licensee(s)	17. Signature(s) of Licensee(s)	18. License Number(s)
James A. McCarty	James A. McCarty	21-49956
Robert A. McCarty	Robert A. McCarty	" "
William G. McCarty	William G. McCarty	" "

19. Location: Same — Number and Street — City and Zip Code — County

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Attached: ☐ Recorded notice, ☒ Fiduciary papers, ☐ _____ (OTHER)

COPIES MAILED 1-28-88

☐ Renewal: Fee of _____ Paid at _____ Office on _____ Receipt No. _____

ABC 211 (1-82) 85 93451

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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To: Department of Alcoholic Beverage Control
1901 Broadway
Sacramento, Calif. 95818 XXXXXX Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S): OFF SALE BEER & WINE

Applied under Sec. 24044 ☒
Effective Date:

FILE NO.
RECEIPT NO. 36118
GEOGRAPHICAL CODE 3902
Date Issued
Temp. Permit
Effective Date:

2. NAME(S) OF APPLICANT(S): CIRCLE K CONVENIENCE STORES, INC. P-12

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
new app	$ 100.00	20
annual fee	28.00	
TOTAL	$ 128.00	

4. Name of Business: Circle K

5. Location of Business—Number and Street: SWC Lodi & Cherokee Lane

City and Zip Code: Lodi 95240 County: San Joaquin

6. If Premises Licensed, Show Type of License: no

7. Are Premises Inside City Limits? yes

8. Mailing Address (if different from 5)—Number and Street: P.O. Box 52084 Phoenix, Arizona 85072-2084 (Temp) (Perm) Perm

9. Have you ever been convicted of a felony? No

10. Have you ever violated any of the provisions of the Alcoholic Beverage Control Act or regulations of the Department pertaining to the Act? Yes

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application. Various

12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

13. STATE OF CALIFORNIA County of _____ Date 1 4 88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

14. APPLICANT SIGN HERE K.W. [signature] Subscribed and sworn to before me on January 4, 1988. [signature]

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of _____ Date _____

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; (3) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

16. Name(s) of Licensee(s)	17. Signature(s) of Licensee(s)	18. License Number(s)

19. Location Number and Street City and Zip Code County

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Attached: ☐ Recorded notice,
☐ Fiduciary papers,
☐ _____ (OTHER) COPIES MAILED 2-2-88 ~~PK TO COUNTY~~

☐ Renewal: Fee of _____ Paid at _____ Office on _____ Receipt No. _____

ABC 211 (1-82) BS 93451

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ALICE M. REINCHE
CITY CLERK
CITY OF LODI

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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To: Department of Alcoholic Beverage Control
1901 Broadway
Sacramento, Calif. 95818 Stockton (DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S): ON SALE BEER AND WINE EATING PLACE

Applied under Sec. 24044 ☐
Effective Date: Issuance

FILE NO.
RECEIPT NO. 393269
GEOGRAPHICAL CODE 3902
Date Issued
Temp. Permit
Effective Date:

2. NAME(S) OF APPLICANT(S)
ABEID, Ebtisam J./Elias N.

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
ORIGINAL	$ 300.00	41
Annual Fee	197.00	
TOTAL	$	

4. Name of Business
Pizza Plus

5. Location of Business—Number and Street
100 N. Cherokee Lane - Unit 1

City and Zip Code: Lodi, Ca. 95240
County: San Joaquin

6. If Premises Licensed, Show Type of License _____

7. Are Premises Inside City Limits? Yes (Temp) (Perm)

8. Mailing Address (if different from 5)—Number and Street
Same

9. Have you ever been convicted of a felony? No

10. Have you ever violated any of the provisions of the Alcoholic Beverage Control Act or regulations of the Department pertaining to the Act? No

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.

12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

13. STATE OF CALIFORNIA County of San Joaquin Date 1-29-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

14. APPLICANT SIGN HERE X [signature] X Ebtisam J. Abeid

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of _____ Date _____

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19. Location Number and Street City and Zip Code County

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Attached: ☐ Recorded notice,
☐ Fiduciary papers,
☐ _____ (OTHER)

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☐ Renewal: Fee of _____ Paid at _____ Office on _____ Receipt No. _____

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CITY CLERK
CITY OF LODI